



Membership Application

Company: _____

Main Contact: Mr./Ms./Mrs. _____

Mailing Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-Mail Address 1: _____ E-Mail Address 2: _____

Reason for Joining: _____

Category Listings 1. _____ 2. _____

Number of Employees: _____ Full Time: _____ Part Time: _____

Number of Seats:(Restaurant) _____ Number of Units/Rooms:(Lodging/Rental) _____

Agents/Professionals:(Real Estate/Insurance/Professional): _____

Annual Investment \$ _____

Application Fee (one time charge) \$ 25.00

Total \$ _____

Your investment is a fully deductible business expense. The Chamber is not a charity, but serves as an advocate organization for area businesses. Because the Chamber plans its budget on your contributions; **investments are continuous unless canceled in writing.**

Signature of Applicant

Date: _____

Visa/MC: _____ Exp. date: _____

Date approved: _____